



Commission on Improving the Status of Children in Indiana

Recommendation to the Commission

Party Submitting Recommendation: CISC, Mental Health and Substance Abuse Task Force

Date of Submission: 8/14/2020

Type of Action Requested:

Legislation Administrative Rule or Policy Resolution of Support or Endorsement Professional/skills development

Other: Activities to enhance data collection and provider/court knowledge

Which of the Commission's Strategic Priorities does this Recommendation help advance (check all that apply):

Child Health and Safety Juvenile Justice and Cross-system Youth
 Mental Health and Substance Abuse Educational Outcomes

Summary of Recommendation:

Enhance access to information about the prevalence of reported and founded cases of serious mental health neglect and promote knowledge among relevant parties about appropriate use of forced treatment via involuntary commitment.

Background of Recommendation:

What is the need or problem, and how does it impact disparate populations?

It is not unusual for parents or guardians to refuse mental health or substance abuse treatment for their child or adolescent. These occurrences typically do not rise to the attention of child welfare agencies or the courts. However, when youth endorse a plan or intent to seriously harm themselves or others and parents/guardians continue to refuse mental health or addiction treatment, clinicians, teachers, clergy, family and other involved parties find themselves in a difficult position in Indiana. There are essentially 3 courses of action and each of these, at present, present problems:

- 1) Involve DCS: When parent/guardian refusal or non-compliance with mental health care is reported to IN DCS as neglect (mandated reporter training makes it clear that it is reportable), it is unclear how often these cases are substantiated. Data is not collected about this specifically. Anecdotally, clinicians report low levels of substantiating mental health neglect in IN.
- 2) Pursue forced treatment through the courts: Indiana civil commitment statutes are not explicit as to their application to minors, but are implicit in a section that directs a juvenile court to transfer the juvenile's case to

probate court for commitment proceedings when hospital placement is necessary. This gives an MD the authority to detain a person for 72 hours (Emergency Detention) and then have the option to continue to petition the court for a forced treatment (Commitment). This has been used successfully, in rare cases, although clinicians are uncomfortable doing so, due to a lack of understanding about use in minors.

3) Both

It is unclear at this time how these problems impact disparate populations, due to lack of data.

What data, research or other information did the recommender consult to formulate this proposal?

IL data suggests that mental health neglect cases are rarely reported.

Indiana Code

IN data was unavailable, but anecdotally thought to be concerning for low use of involuntary commitment and low rates of CHINS 6.

What disproportionality did the data reveal?

See above.

What is the current response to the problem by the State of Indiana?

Deferring to parental/guardian wishes, leading to undertreatment of serious mental health and substance use disorders.

What solution is the recommender proposing, and how does it affect disparate populations?

1) Educational efforts to make pediatric mental health clinicians (via DMHA and advocates) and judges (via Office of Court Services) aware of the potential benefit of utilizing the ED/Commitment method.

2) Create documentation for use in facilities across the state to improve transparency with parents/guardians and clarity around processes (via Mental Health Advocates and DMHA).

3) Optional consideration: Consider amendment of the commitment statutes to explicitly apply to juveniles and to add developmentally appropriate language (legislative).

4) DCS should code both referred and substantiated cases according to whether or not mental health/substance abuse neglect was involved in databases & collect information on utilization of CHINS 6 cases and understand barriers to use.

5) DCS to develop language to assist staff answering mandated reporter line to be able to collect relevant/necessary information

How does the solution address the disproportionality in the data?

Click or tap here to enter text.

If a legislative request, cite the current relevant code and specify what change is being recommended.

NONE

If a policy request, cite the current relevant policy and specify what change is being recommended.

Unknown

If the recommendation involves an endorsement or public promotion of a specific initiative or statement, attach the document of which you are seeking the Commission's support/endorsement/promotion.